

Guarantor Order

Policy: All clients must be financially screened to evaluate a client's/responsible party's ability to pay for the services received. This includes third party guarantors, social welfare programs, and the client's/responsible party's financial resources. The guarantor order below is predicated on Medi-Cal being the third party payer of last resort in relation to client responsibility and local funding plan coverage of claim amounts not reimbursed with federal funding dollars.

All providers must complete financial eligibility, Systemwide Annual Liability, and funding plan information.

Contract provider programs (Short-Doyle)

The following guarantor order applies to **ALL CONTRACT PROVIDER** programs. (Please refer to the Financial Screening Manual for more detailed information.)

1. Commercial guarantors/private insurance/other health care coverage (if applicable)*
2. Medicare (if applicable)*
3. Medi-Cal or Medi-Cal with a share of cost (if applicable)
4. LA County

****If the client does not have this guarantor, do not enter it into financial eligibility for the client. In general, if the client does have both private insurance and Medicare, the private insurance is primary to Medicare. There are occasions, however, where Medicare should be billed first. When clinic financial operations staff call the insurance company to verify eligibility, they should also confirm that the policy in question is primary to other coverage plans.***

This is the guarantor order for clients in the **Katie A.** sub-class who are receiving services in contract provider programs:

1. Katie A. Medi-Cal
2. LA County

The Katie A. Medi-Cal guarantor should only be assigned to clients when membership in the Katie a. sub-class has been confirmed by a practitioner. Identification of a client on a report as "Potential Katie A. Sub-Class Member" is, by itself, insufficient to confirm sub-class membership

Contract provider programs (continued)

For **CalWORKs** clients in contract provider programs, the following guarantor order applies:

1. CalWORKs
2. Medi-Cal
3. LA County

This is the guarantor order for **Healthy Families** clients in contract provider programs:

1. Healthy Families
2. LA County

The Healthy Families guarantor should only be used when the client has a Medi-Cal aid code indicating Healthy Families (i.e., 9H or 9R).

For **Full Cost of Care** clients in contract provider programs, use the following guarantor order:

1. LA County

Use the following guarantor order for clients without any third party coverage in contract provider programs, use the following guarantor order:

1. LA County

GROW clients are indigent and should not have any third party payers like Medi-Cal, Medicare, or private insurance. Because GROW clients are on General Relief, they do not have an annual liability (i.e., \$0 UMDAP liability) and charges should distribute to the LA County guarantor.

Contract providers must report the correct funding source authorization and must never use any of the Self-Pay guarantors.